House Study Bill 89 - Introduced

SENATE/HOUSE FILE ______

BY (PROPOSED DEPARTMENT OF INSPECTIONS AND APPEALS BILL)

A BILL FOR

- 1 An Act relating to investigative costs of the Medicaid fraud
- 2 control unit.
- 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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- 1 Section 1. Section 249A.7, subsection 3, Code 2011, is 2 amended to read as follows:
- 3 3. a. A Medicaid fraud account is created in the general
- 4 fund of the state under the authority of the department of
- 5 inspections and appeals. Moneys from penalties, investigative
- 6 costs recouped by the Medicaid fraud control unit, and other
- 7 amounts received as a result of prosecutions involving the
- 8 department of inspections and appeals investigations and audits
- 9 to ensure compliance with the medical assistance program that
- 10 are not credited to the program may be credited to the account.
- 11 b. Notwithstanding sections 8.33 and 8.39, moneys credited
- 12 to the account shall not revert to any other account or fund
- 13 and are not subject to transfer except as specifically provided
- 14 by law. Moneys in the fund shall be used for costs associated
- 15 with the department of inspections and appeals' efforts to
- 16 address medical assistance program fraud and abuse and for
- 17 costs incurred by the department of inspections and appeals
- 18 or other agencies in providing regulation, responding to
- 19 allegations, or other activity involving chapter 1350.
- 20 c. The department of inspections and appeals and other
- 21 agencies receiving moneys from the account shall provide a
- 22 joint annual report to the governor and general assembly
- 23 detailing the expenditures from the account and activities
- 24 performed relating to the expenditures. This subsection is
- 25 repealed on July 1, 2012.
- 26 d. For the purposes of this subsection, "investigative
- 27 costs" means the reasonable value of a Medicaid fraud control
- 28 unit investigator's, auditor's, or employee's time attributable
- 29 to a particular case, any moneys expended by the Medicaid
- 30 fraud control unit attributable to a particular case, and the
- 31 reasonable fair market value of resources used or expended by
- 32 the Medicaid fraud control unit attributable to a particular
- 33 case.
- 34 Sec. 2. Section 910.1, subsection 4, Code 2011, is amended
- 35 to read as follows:

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- 4. "Restitution" means payment of pecuniary damages to 2 a victim in an amount and in the manner provided by the 3 offender's plan of restitution. "Restitution" also includes 4 fines, penalties, and surcharges, the contribution of funds to 5 a local anticrime organization which provided assistance to law 6 enforcement in an offender's case, the payment of crime victim 7 compensation program reimbursements, payment of restitution 8 to public agencies pursuant to section 321J.2, subsection 9 13, paragraph "b", court costs including correctional fees 10 approved pursuant to section 356.7, court-appointed attorney
- 11 fees ordered pursuant to section 815.9, including the expense
- 12 of a public defender, and the performance of a public service
- 13 by an offender in an amount set by the court when the offender
- 14 cannot reasonably pay all or part of the court costs including
- 15 correctional fees approved pursuant to section 356.7, or
- 16 court-appointed attorney fees ordered pursuant to section
- 17 815.9, including the expense of a public defender, and payment
- 18 to the medical assistance program pursuant to chapter 249A for
- 19 expenditures paid on behalf of the victim resulting from the
- 20 offender's criminal activities including investigative costs
- 21 incurred by the Medicaid fraud control unit pursuant to section
- 22 249A.7.

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- 23 Sec. 3. Section 910.2, subsection 1, Code 2011, is amended
- 24 to read as follows:
- 1. In all criminal cases in which there is a plea of guilty,
- 26 verdict of guilty, or special verdict upon which a judgment
- 27 of conviction is rendered, the sentencing court shall order
- 28 that restitution be made by each offender to the victims of
- 29 the offender's criminal activities, to the clerk of court for
- 30 fines, penalties, surcharges, and, to the extent that the
- 31 offender is reasonably able to pay, for crime victim assistance
- 32 reimbursement, restitution to public agencies pursuant to
- 33 section 321J.2, subsection 13, paragraph "b", court costs
- 34 including correctional fees approved pursuant to section
- 35 356.7, court-appointed attorney fees ordered pursuant to

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1 section 815.9, including the expense of a public defender, when 2 applicable, contribution to a local anticrime organization, 3 or restitution to the medical assistance program pursuant to 4 chapter 249A for expenditures paid on behalf of the victim 5 resulting from the offender's criminal activities. However, 6 victims shall be paid in full before fines, penalties, and 7 surcharges, crime victim compensation program reimbursement, 8 public agencies, court costs including correctional fees 9 approved pursuant to section 356.7, court-appointed attorney 10 fees ordered pursuant to section 815.9, including the expenses 11 of a public defender, contributions to a local anticrime 12 organization, or the medical assistance program are paid. 13 structuring a plan of restitution, the court shall provide 14 for payments in the following order of priority: victim, 15 fines, penalties, and surcharges, crime victim compensation 16 program reimbursement, public agencies, court costs including 17 correctional fees approved pursuant to section 356.7, 18 court-appointed attorney fees ordered pursuant to section 19 815.9, including the expense of a public defender, contribution 20 to a local anticrime organization, and the medical assistance 21 program.

22 EXPLANATION

This bill relates to investigative costs incurred by
the Medicaid fraud control unit. The bill provides that
investigative costs recouped by the Medicaid fraud control
unit, in addition to penalties and other amounts received as a
result of prosecutions to ensure compliance with the medical
assistance program that are not credited to the Medicaid
program, may be credited to the Medicaid fraud account. The
bill defines "investigative costs" as the reasonable value of
a Medicaid fraud control unit investigator's, auditor's, or
employee's time attributable to a particular case, any moneys
expended by the Medicaid fraud control unit attributable to
a particular case, and the reasonable fair market value of
resources used or expended by the Medicaid fraud control unit

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- 1 attributable to a particular case.
- The bill also amends the definition of "restitution" under
- 3 the restitution chapter (Code chapter 910) to include payment
- 4 to the medical assistance program for expenditures paid on
- 5 behalf of the victim resulting from the offender's criminal
- 6 activities including investigative costs incurred by the
- 7 Medicaid fraud control unit.